

Information for Employers About The New Immigration Law

Information for Employers About The New Immigration Law

The Immigration Reform and Control Act of 1986 will affect all American employers. The Immigration and Naturalization Service (INS) is in the process of preparing regulations and other materials to implement this law. More detailed information and forms will be available in the near future. Until then, this fact sheet will address some issues such as:

- What do I do now?
- What about workers hired before the law passed?
- How do I deal with illegal workers who may qualify to be legalized?

Good faith and common sense in the hiring process can accomplish the goals of the Immigration Reform and Control Act of 1986 and Title VII of the Civil Rights Act of 1964.

General Principles for Employers:

- Commit to employ only U.S. citizens and aliens authorized to work in the United States. This is America's policy and should be yours as well.
- Consider displaying the attached poster to inform your workforce and job applicants of your support of this national policy.
- Follow the same procedures for all new hires.
- Do not discharge present employees or refuse to hire new employees based on foreign appearance or language.

Interim Procedures for Employees Hired After November 6, 1986, the date the Immigration Act became law.

From now until June 1, 1987 you should inform, either verbally or in writing, each new job applicant that you:

- Hire only United States citizens and aliens lawfully authorized to work in the United States.
- Will require all new employees to complete the designated employers verification forms when they become available. A onepage model draft form is attached for your information. Final forms will be available by June 1, 1987, when the eligibility verification procedures become effective.

You should ask each new person hired the following questions:

- 1. Are you a U.S. citizen
- 2. Are you an alien lawfully authorized to work in the United States?

We suggest that you note his or her answers on your employment records. There is no requirement to review any documentation at this time.

After June 1, 1987, follow these procedures:

- Hire only citizens and aliens lawfully authorized to work in the United States.
- Continue to advise all new job applicants of your policy to such effect.
- Require all new employees to complete and sign the verification form designated by INS to certify that they are eligible for employment.
- Examine documentation presented by new employees, record information about the documents on the verification form, and sign the form.
- Retain the form for three years or for one year past the end of employment of the individual, whichever is longer.
- If requested, present the form for inspection by INS or Department of Labor officers. No reporting is required.

Considerations Regarding Employees Hired before November 7, 1986.

- There is no requirement to verify status of employees hired before November 7, 1986, but if you choose, you can do so as described in the prior section. If you choose to verify status of pre-November 7, 1986 hires, you should do so for all employees.
- No employer sanctions penalties can be imposed against you for merely retaining an illegal alien in your workforce hired before November 7, 1986.
- The fact that an illegal alien was on your payroll before November 7, 1986, does not give him or her any right to legally remain in the United States. Unless such alien is legalized or otherwise obtains permission from the INS to remain in the United States, he or she is subject to apprehension and removal.

Advice To Employers Regarding Employees or Applicants Known to be Illegal Aliens.

Under the new law certain illegal aliens may apply to the INS for legal resident status:

- Legalization program —
 Residents in the United States
 since January 1, 1982 in unlawful
 status may apply beginning May
 5, 1987.
- Special Agricultural Worker (SAW) Program — Field workers in perishable agricultural commodities for a 90-day period, from May 1, 1985 – May 1, 1986, may apply beginning June 1, 1987.

Various voluntary organizations, churches, state or local government agencies, unions, business

The American Policy is our Policy:

We Hire Only U.S. Citizens and Lawfully Authorized Alien Workers

Provided by:
The Immigration and Naturalization Service
Washington, D.C. 20536

EMPLOYMENT ELIGIBILITY VERIFICATION

A citizen or national of the United States. An alien lawfully admitted for permanent residence (Alien Number A	,	
Date of Birth (Month/Day/Year) A citizen or national of the United States. An alien lawfully admitted for permanent residence (Alien Number A). An alien authorized by the Immigration and Naturalization Service to work in the United States (Alien Number A or Admission Number expiration of employment authorization, if any).	,	
I attest, under penalty of perjury, that I am (check a box): A citizen or national of the United States. An alien lawfully admitted for permanent residence (Alien Number A	,	
An alien lawfully admitted for permanent residence (Alien Number A	,	
An alien lawfully admitted for permanent residence (Alien Number A	,	
An alien lawfully admitted for permanent residence (Alien Number A	,	
An alien authorized by the Immigration and Naturalization Service to work in the United States (Alien Number A	,	
I attest, under penalty of perjury, the documents that I have presented as evidence of identity and employment eligibility are genuine and relate to me federal law provides for imprisonment and/or fine for any false statements or use of false documents in connection with this certificate. Signature Date (Month/Day/Year) PREPARER/TRANSLATOR CERTIFICATION (If prepared by other than the individual). I attest, under penalty of perjury, that the above was prepared by me at the request of the named individual and is based on all information of which I have any knowledge. Signature Name (Print or Type) Address (Street Name and Number) City State Zip Code EMPLOYER REVIEW AND VERIFICATION: (To be completed and signed by employer.) Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the	,	
I attest, under penalty of perjury, the documents that I have presented as evidence of identity and employment eligibility are genuine and relate to me federal law provides for imprisonment and/or fine for any false statements or use of false documents in connection with this certificate. Signature Date (Month/Day/Year) PREPARER/TRANSLATOR CERTIFICATION(If prepared by other than the individual). Lattest, under penalty of perjury, that the above was prepared by me at the request of the named individual and is based on all information of which I have any knowledge. Signature Name (Print or Type) Address (Street Name and Number) City State Zip Code PREPARER/TRANSLATOR: (To be completed and signed by employer.) Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the	e. I am aware tha	
PREPARER/TRANSLATOR CERTIFICATION(If prepared by other than the individual). I attest, under penalty of perjury, that the above was prepared by me at the request of the named individual and is based on all information of which I have any knowledge. Signature Name (Print or Type) Address (Street Name and Number) City State Zip Code EMPLOYER REVIEW AND VERIFICATION: (To be completed and signed by employer.) Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the	e. I am aware the	
PREPARER/TRANSLATOR CERTIFICATION(If prepared by other than the individual). I attest, under penalty of perjury, that the above was prepared by me at the request of the named individual and is based on all information of which I have any knowledge. Signature Name (Print or Type) Address (Street Name and Number) City State Zip Code EMPLOYER REVIEW AND VERIFICATION: (To be completed and signed by employer.) Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the		
PREPARER/TRANSLATOR CERTIFICATION (If prepared by other than the individual). Lattest, under penalty of perjury, that the above was prepared by me at the request of the named individual and is based on all information of which I have any knowledge. Signature Name (Print or Type) Address (Street Name and Number) City State Zip Code EMPLOYER REVIEW AND VERIFICATION: (To be completed and signed by employer.) Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the		
at the request of the named individual and is based on all information of which I have any knowledge. Signature Name (Print or Type) Address (Street Name and Number) City State Zip Code		
Signature Name (Print or Type) Address (Street Name and Number) City State Zip Code 2 EMPLOYER REVIEW AND VERIFICATION: (To be completed and signed by employer.) Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the		
Address (Street Name and Number) City State Zip Code EMPLOYER REVIEW AND VERIFICATION: (To be completed and signed by employer.) Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the		
2 EMPLOYER REVIEW AND VERIFICATION: (To be completed and signed by employer.) Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the		
2 EMPLOYER REVIEW AND VERIFICATION: (To be completed and signed by employer.) Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the		
Examine one document from those in List A and check the correct box, or examine one document from List B and one from List C and check the		
List A List B List C Identity and Employment Eligibility Identity and Employment Eligibili	- <u>-</u>	
☐ A State issued driver's license or I.D. card with a photograph, or information, including name, sex, date of birth, height, weight, and ☐ Original Social Security Nun than a card stating it is	mber Card (othe	
□ Certificate of United States Citizenship color of eyes. employment) (Specify State) □ A birth certificate issued by		
☐ Certificate of Naturalization ☐ U.S. Military Card ☐ A birth certificate issued by S municipal authority bearing certification	State, county, og a seal or othe	
Unexpired foreign passport with attached Employment Authorization Other (Specify document and issuing authority) Unexpired INS Employment Specify form	Authorization	
Alien Registration Card with photograph #	4 1	
Document Identification Document Identification Document Identification		
#		
Expiration Date (if any) Expiration Date (if any) Expiration Date (if any)		
CERTIFICATION: I attest, under penalty of perjury, that I have examined the documents presented by the above individual, that they appear to be	genuine, relate t	
the individual named, and that the individual, to the best of my knowledge, is authorized to work in the United States.	a and	
Signature Name (Print or Type) Title	0.00	
Employer Name Address Date		

Form I-9 (03/20/87) OMB No. 1115-0136

U.S. Department of Justice Immigration and Naturalization Service

Employment Eligibility Verification

NOTICE:

Authority for collecting the information on this form is in Title 8, United States Code, Section 1324A. It will be used to verify the individual's eligibility for employment in the United States. Failure to present this form for inspection to officers of the Immigration and Naturalization Service or Department of Labor within the time period specified by regulation, or improper completion or retention of this form may be a violation of 8 USC §1324A and may result in a civil money penalty.

Section 1. Employee's/Preparer's instructions for completing this form.

Instructions for the employee.

All employees, upon being hired, must complete Secton 1 of this form. Any person hired after November 6, 1986 must complete this form. (For the purpose of completion of this form the term "hired" applies to those employed, recruited or referred for a fee.)

All employees must print or type their complete name, address, date of birth, and Social Security Number. The block which correctly indicates the employee's immigration status must be checked. If the second block is checked, the employee's Alien Registration Number must be provided. If the third block is checked, the employee's Alien Registration Number or Admission Number must be provided, as well as the date of expiration of that status, if it expires.

All employees must sign and date the form.

Instructions for the preparer of the form, if not the employee.

If the employee is assisted with completing this form, the person assisting must certify the form by signing it, and printing or typing his or her complete name and address.

Section 2. Employer's instructions for completing this form.

(For the purpose of completion of this form, the term "employer" applies to employers and those who recruit or refer for a fee.)

Employers must complete this section by examining evidence of identity and employment authorization, and:

- checking the appropriate box in List A or boxes in both Lists B and C;
- recording the document identification number and expiration date (if any);
- recording the type of form if not specifically identified in the list;
- signing the certification section.

NOTE: Employers are responsible for reverifying employment eligibility of aliens upon expiration of any employment authorization documents, should they desire to continue the alien's employment.

Copies of documentation presented by an individual for the purpose of establishing identity and employment eligibility may be copied and retained for the purpose of complying with the requirements of this form and no other purpose. Any copies of documentation made for this purpose should be maintained with this form.

Employers may photocopy or reprint this form, as necessary, for their use.

RETENTION OF RECORDS.

After completion of this form, it must be retained by the employer during the period beginning on the date of hiring and ending:

- three years after the date of such hiring, or;
- one year after the date the individual's employment is terminated, whichever is later.